24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Freedom Partners Action Fund, Inc.	C C00564765
	C 000304703
Check if X 24-hour report 48-hour report New report Amends report filed	d on M M M / D D / Y Y Y Y Y
Full Name of Payee	Date of Public Distribution/Dissemination
I360	10 29 / Y Y Y Y
Mailing Address PO BOX 37046	Amount
City State Zip Code	611259.00
BALTIMORE MD 21297	Transaction ID : SE24.204 Date of Disbursement or Obligation
Purpose of Expenditure MEDIA PLACEMENT - BROADCAST/CABLE/SATELLITE Category/ Type	10 23 / Y Y Y Y Y Y
Name of Federal Candidate Support Office	ee Sought: House District:
THOMAS C. COTTON Oppose	President State: AR State:
Calendar Year-To-Date Per Election for Office Sought Disb 2014	oursement For:
Full Name of Payee	Date of Public Distribution/Dissemination
	M M / D D / Y Y Y Y
Mailing Address	Amount
City State Zip Code	
	Date of Disbursement or Obligation
Purpose of Expenditure Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	ce Sought: House District:
Oppose	President Senate State:
Galorida Todi To Balo	pursement For: Primary General
Per Election for Office Sought	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	611259.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	611259.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
	10 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	